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TRICARE
MANAGEMENT ACTIVITY

MB&RB

**CHANGE 149
6010.54-M
SEPTEMBER 28, 2011**

**PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
TRICARE POLICY MANUAL (TPM), AUGUST 2002**

The TRICARE Management Activity has authorized the following addition(s)/revision(s).

CHANGE TITLE: CODING AND CLARIFICATION UPDATES - OCTOBER 2010

CONREQ: 15092

PAGE CHANGE(S): See pages 2 and 3.

SUMMARY OF CHANGE(S): See pages 4 and 5.

EFFECTIVE AND IMPLEMENTATION DATE: Upon direction of the Contracting Officer.

This change is made in conjunction with Aug 2002 TRM, Change No. 141.

Ann N. Fazzini
Ann N. Fazzini
**Chief, Medical Benefits and
Reimbursement Branch**

ATTACHMENT(S): 55 PAGE(S)
DISTRIBUTION: 6010.54-M

WHEN PRESCRIBED ACTION HAS BEEN TAKEN, FILE THIS TRANSMITTAL WITH BASIC DOCUMENT.

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SUMMARY OF CHANGES

CHAPTER 1

1. Section 16.1. Updates the list of CPT Procedure Codes. Deletes codes that are no longer valid. The codes that are now valid and that replaced the deleted codes are in the range of current published policy.
2. Section 17.1. Adds "S" code S0189 to list of reimbursable codes.

CHAPTER 4

3. Section 5.1. Administrative correction of text, changing 'Tropical' to 'Topical.' Updates the list of CPT Procedure Codes. Adds the HCPCS Procedure Code, S0189. Clarifies that testopel pellets are covered for FDA label indications for males. Clarifies that subcutaneous implantable pellets that are custom compounded of estradiol, estrogen, or testosterone in combination with estrogen or estradiol and used for treatment of females are not covered. Adds VI. Effective Dates for dates removed from paragraphs in IV. Policy.
4. Section 15.1. Updates the list of CPT Procedure Codes.
5. Section 20.1. Updates the list of CPT Procedure Codes.

CHAPTER 5

6. Section 1.1. Updates the list of CPT Procedure Codes. Updates the list of HCPCS Procedure Codes.

CHAPTER 7

7. Table of Contents. Administrative edit.
8. Section 2.1. Revises the age at which breast cancer screenings are covered and the frequency of which these screenings are covered. It also revises the risk factors that are considered to put women at greater than average risk of breast cancer. Administrative corrections, IV Policy, to maintain consistency in document format.
9. Section 2.2. Revises the age at which breast cancer screenings are covered and the frequency of which these screenings are covered. It also revises the risk factors that are considered to put women at greater than average risk of breast cancer. Administrative corrections to table.

SUMMARY OF CHANGES (Continued)

CHAPTER 7 (Continued)

10. Section 7.1. 32 CFR (Part 199) change allowing non-physician referral for physical therapy, occupational therapy and speech therapy.
11. Section 18.2. 32 CFR (Part 199) change allowing non-physician referral for physical therapy, occupational therapy and speech therapy.
12. Section 18.3. 32 CFR (Part 199) change allowing non-physician referral for physical therapy, occupational therapy and speech therapy.
13. Section 27.1. Updates list of HCPCS Procedure Codes. Adds the specific names for Botox A & B to existing policy language. Clarifies that Botox use for cosmetic indications is excluded from coverage.

CHAPTER 9

14. Section 12.1. Administrative correction that removes word 'monthly' from sentence.
15. Section 15.1. Clarifies the restrictions regarding use of the ECHO Home Health Care-Respite Care.

CHAPTER 10

16. Section 2.1. Removes reference to former TAMP eligibility periods.

CHAPTER 11

17. Section 3.1. Updates the list of providers.
18. Section 12.1. Administrative correction to text regarding TED record coding.

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19. Administrative updates.

